

ACH 0000 ~~740~~ 296450 11/10/13

State of New Mexico
 Voucher Batch Report
 Business Unit 66500 Department of Health
 Vouchers with Final Agency Approval But Not Yet Reviewed/Approved By DPA/PCD
 As of Date 01/07/2013
 Voucher Vchr VchrLineDescr Distr Account Account Description Fund VendorName Withhold Accounting Period PurchaseOrder Invoice Number Total Amount
 Number Line Line#

00320891	1	I/S meals & lodging	1	542200	Employee I/S Meals & L	06101	NASH GAYLE-001	2013	01	0000096944	Nash, G. 12.16-1	705.00
Total For Voucher												705.00

VP

Summary | Invoice Information | Payments | Voucher Attributes | Error Summary

Business Unit: 66500
Voucher ID: 00320891
Voucher Style: Regular
Vendor: NASH, GAYLE C
1190 ST FRANCIS DR N 4100
SANTA FE, NM 87502

Invoice Number: Nash, G. 12.16-12.21.12
Invoice Date: 01/03/2013
Total: 705.00

*Pay Terms: Pay Now ☐ Schedule Payments ☐

Saved

Payment Information

Scheduled Payment: 1

*Remit to: 0000099443 Location: 001 *Address: 1 

NASH, GAYLE C
1190 ST FRANCIS DR N 4100
SANTA FE, NM 87502

Find | View All | First  1 of 1  Last

Gross Amount: 705.00 USD

Discount: 0.00 USD ☐ Discount Denied

Late Charge

Scheduled Due: 01/03/2013 

Net Due: 01/03/2013

Discount Due:

Accounting Date:

Payment Method

*Bank: WFB10

*Account: B

*Method: ACH ACH

Message:

Pay Group:

*Handling: RE

*Netting: N 

Messages

Message will appear on remittance advice.

Summary | **Invoice Information** | **Payments** | **Voucher Attributes** | **Error Summary**

Business Unit: 66500 Invoice Number: Nash, G. 12.16-12.21.12
Voucher ID: 00320891 Invoice Date: 01/03/2013
Voucher Style: Regular Total: 705.00

Voucher Processing

☒ Post Voucher ☐ Close Voucher
☒ Revalue Voucher ☐ Delete Voucher

Accounting Instructions

*Accounting Template: STANDARD Account At: Gross

Match Action

*Status: Ready
☐ Pay Unmatched Voucher

Transaction Currency

*Source: Tables *Currency: USD Rate Type: CRNRT Exchange Rate: 1.00000000

Voucher Approval

*Approval: Specify at this Level Business Process: PROCESS_VOUCHERS
Approval Rule Set: Payment Approval Rule Set 1

Self Billing Invoice

*SBI Num Option: Group Vouchers (Auto-Nur) SBI Number:

Prepayment

Prepayment Reference: ☐ Automatically Apply Prepayment ☐ Postpone Withholding

Letter of Credit

Letter of Credit ID: 

Tax Group

[illegible]

Employee Information	Employee Name:	Gayle Nash	Position:	CNO
	Department ID and Fund:	6001001000	Telephone:	505-690-1065
	Post of Duty:	Las Cruces	Residence:	Las Cruces

Vehicle Information	☒ Check if state vehicle		☐ Check if personal vehicle		License #:	001768-SG
	Year:	2011	Make:	Nissan	Model:	Altima

Trip/Training Information	Please provide agendas, itineraries and any relevant documents.	
	Course Name:	Meeting with Staff in Santa Fe
	☒ Check if training is required	☐ Check if Continuing Education credits will be granted

Travel Information	Date of Request:	12/14/12	Destination:	Santa Fe						
	Departure Date: (month/day/yr)	12/16/12	Time:	06:00	AM	Return Date: (month/day/yr)	12/21/12	Time:	06:30	PM
	☒ In-State ☐ Out-of-State ☐ Training ☐ Time Only ☐ *Actuals ☐ No cost to State/Paid By:									

546700: Subscription/Annual Dues		542100: In-State Mileage: @ .41 per mile	\$ 0.00
546800: Registration – Employee		542200: In-State Per Diem: @ \$85/day	\$ 0.00
546800: Registration – Vendor		Santa Fe Only: 5 @ \$135/day	\$ 675.00
549600: Airline Cost – Vendor		549700: Out-of-State Per Diem: @ \$115/day	\$ 0.00
Airline Cost – Employee		Actuals: @ /day	\$ 0.00
Baggage Fee		With meals: @ \$45/day	\$ 0.00
Shuttle Fee		Partial day: @ \$12/2-6 hrs	\$ 0.00
Taxi Fee		Partial day: @ \$20/6-12 hrs	\$ 0.00
Parking Fee		Partial day: 1 @ \$30/12 or more hrs	\$ 30.00
Mileage @ .41 per mile	\$ 0.00	Total reimbursement to employee	\$ 705.00
Miscellaneous Expense: days @ \$6 per day	\$ 0.00	Total cost of trip	\$ 705.00
Car Rental: days @ per day	\$ 0.00		

Shyle Nash 12-28-2012
Employee Signature Date

Supervisor/Bureau Chief Signature _____ Date _____

Division Director/Hospital Administrator **Date**
(As per specific division requirements)

Cabinet Secretary Signature
(To be obtained for Division Directors' requests and
when Division Directors are not available to sign approval.)

12/28/12
Date